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ABSTRACT

This report provides an Iowa state senator's perspective on developing state policies to foster collaboration at the service delivery level to meet the needs of children and families more effectively. The first chapter provides two case examples of children that the current system fails. It suggests that simply providing more funding or requiring agency administrators to collaborate will not address individual needs. The second chapter defines collaboration in the context of state policymaking. It describes three elements essential to the collaborative process and four organizational levels at which it must occur. It then introduces the concept of first, second, and third generation approaches to collaboration. The third chapter relates Iowa's experience in fostering collaboration in the child welfare system, through "decategorizing" state funding for such services. It explains some of the potential benefits for families of decategorization and the conditions necessary to develop such a system. The fourth chapter describes a family development grant program. It seeks to link welfare-to-work, child development, and child welfare concerns by focusing on overall family needs. The last chapter discusses how state policy initiatives, drawing from the experiences of these two Iowa programs, can foster collaboration and provide greater service intergration. (16 references) (LLL)

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Improving Children's Welfare

Learning from Iowa

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Improving Children's Welfare:

Learning from Iowa

by

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Table of Contents

Acknowledgments v

Executive Summary vii

I. Two Cases for Collaboration: Brandon and Jenny 1

II. Collaboration and State Policymaking 3

III. Decategorizing Child Welfare Services 7

IV. Family Development 13

V. Conclusion 19

Bibliography 23

About the Author 25

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Executive Summary

This report provides one lawmaker's perspective on developing state policies to foster collaboration at the service delivery level to meet the needs of children and families more effectively. While collaboration often occurs at the managerial level, it should be designed ultimately to take place at the worker-family level.

The first chapter of this report provides two case examples of children that the current fragmented service delivery system fails. It uses the case examples to explain why state policymakers have become interested in furthering collaborative efforts as a means to provide services both more efficiently and effectively. Further, it suggests that simply providing more funding or requiring agency administrators to collaborate will not address the individual needs posed by the case studies.

Chapter two defines collaboration in the context of state policymaking. It describes the three elements essential to the collaborative process, the four organizational levels at which it must occur, and introduces the concept of first, second, and third generation approaches to collaboration.

The next chapter relates Iowa's experience in fostering collaboration in the child welfare system--through "decategorizing" state funding for such services. It explains some of the potential benefits for families of decategorization and the conditions necessary to develop such a system.

The fourth chapter describes a second initiative in Iowa, a family development grant program. It seeks to link welfare-to-work, child development, and child welfare concerns by focusing on overall family needs, not only on immediate employment.

The last chapter discusses how state policy initiatives, drawing from the experiences of these two Iowa programs, can foster collaboration and provide greater service integration.

I

Two Cases for Collaboration: Brandon and Jenny

Case Study One

Brandon, age seven, has been diagnosed as both severely behaviorally disordered and moderately mentally retarded. He has had unsuccessful stays in both foster homes and residential treatment facilities, neither of which has been able to provide the around-the-clock intensive supervision needed to control his outbursts. His family is not new to the social welfare system: One of the older children is in the state training school and another has behavioral problems in school. The parents display little control over their children and have problems of their own, although they have received sporadic family counseling. They lack economic resources to make changes that have been recommended in their housing situation. Currently, the Department of Human Services is recommending placement of Brandon in an out-of-state facility, which charges $700 per day and which maintains that it will need to work with him for at least 18 months to effect any change. If he is placed there, the state will be spending more than $300,000 annually to provide substitute care for this family, which include the costs for Brandon, his older sibling in the training school, special education expenditures, and the occasional services other members of the family use.

Case Study Two

Jenny, also seven, is behind her fellow first-grade students in reading and other activities. She often is late to school, as her mother works nights and sometimes does not get up in time to get her off to school. There are no books in Jenny's home, and her mother, a single parent who dropped out in the ninth grade, views the school system with a sense of powerlessness and distrust. She provides for Jenny as best she can, but she knows the 10-year-old trailer they rent is drafty and is one reason that her daughter has frequent colds and a constantly runny nose. Jenny's teacher likes the well-behaved, quiet youngster and tries to give her some extra attention in class, but she knows that Jenny is likely to be a dropout in the years ahead. Although a number of social and community agencies nearby offer services to help such families, Jenny's mother has grown weary of being placed on waiting lists, referred and then told she doesn't meet eligibility standards, or informed that what she needs is not what the agency provides.

These case studies are drawn from actual families in Iowa, but every state has children and families like them. Although these cases are different from one another, most policymakers and social welfare advocates would agree that the system is failing these two seven-year-olds. In Brandon's case, this failure already is costing the state substantial social welfare expenditures. In Jenny's case, future societal costs from the failure to meet her

needs are likely to be considerable, both in lost productivity and in potential social welfare assistance, as she sees that her opportunities in life are limited.

In both of these cases, the fragmented system of services and programs for children represents a barrier to their receiving what they need. Eligibility criteria may rule out necessary services, or such services may be limited to providing only a small part of what the family requires. Piecing together such services may result in support that is uncoordinated, even at cross-purposes, and insufficient from any source to establish the worker-family relationship that could enable the family to take care of itself.

In the first case study, the issue is not one of resources, as tremendous amounts of money are already being spent trying to remedy existing problems for Brandon and his family. The question must be raised, however, whether those resources are being expended *efficiently*. When we add together all the intakes, assessments, diagnoses, evaluations, and case plans developed for individual members in Brandon's family by different service providers and professionals, we see much duplication of effort. Furthermore, the fragmented service delivery system itself is confusing and difficult to access, particularly for families with limited resources and under substantial stress. A key question for state policymakers is whether a better, or at least a less expensive, case and service plan can be developed for this family.

In the second case study, although the issue may be one of resources in the short term, it also is one of providing services *effectively*. The teacher knows that Jenny brings more than educational needs to her classroom and that the time spent on the child's educational development in the classroom is not meeting her developmental needs. Is there a more effective way to provide support for Jenny and her mother than through a system of many discrete, categorically defined services? State policymakers may wonder whether there is some way to help Jenny reach her potential and break the cycle of dependency and educational failure experienced in her family.

Cases like these have produced calls from state legislators and from workers within the many systems involved for greater collaboration among agencies serving children and families. Some of these calls have been for better case management; some for more integrated service delivery systems.

While collaboration often has been viewed solely as a managerial or administrative prerogative, policymakers ultimately are concerned that more effective services are provided at the worker-family level. Particularly in the case of Jenny, professionals and legislators agree that a caring and guiding adult, providing support to the family, often is a key to helping her succeed. The challenge then is to develop policies that ensure effective and efficient local services for Brandon and Jenny and their families.

II

Collaboration and State Policymaking

Webster's New World Dictionary defines the word *collaborate* as follows:

- To work together, especially in some literary, artistic, scientific undertaking; or
- To cooperate with an enemy invader.

Many persons confronted with a demand from above to collaborate may indeed feel that the second definition is an appropriate one. Often, they feel they are asked to do someone else's job or, at a minimum, to do more work solely to ease the load on someone else.

Used in the public policy sense, however, collaboration includes only those activities that incorporate *all* of the following:

- Jointly developing and agreeing to a set of goals and directions;
- Sharing responsibility for obtaining those goals; and
- Working together to achieve those goals, appropriately using the expertise of each collaborator.

In this context, collaboration is a way of obtaining goals that cannot be achieved alone (or, at a minimum, cannot be achieved as efficiently). As a process, collaboration is a means to an end, not an end in itself. It is likely to be time-consuming, as each collaborator must learn other collaborators' roles and responsibilities and adapt to a consensual as opposed to hierarchical decision-making system.

State policymakers have become interested in collaboration for several reasons. First, legislators must deal with very real threats to child well-being that the current system has been unable to address. There are major problems--infant and child mortality, child poverty, child abuse and neglect, child mental illness, juvenile delinquency, adolescent pregnancy, adolescent substance abuse, youth gangs, school failure, and youth unemployment--that demand public policy responses.

Second, child-serving institutions have felt the strains of dealing with these problems. The current funding and service delivery system is fragmented and uncoordinated, often producing service duplication or inappropriate responses to individual children and families. This situation results in *inefficient* expenditure of limited state resources.

Further, because eligibility for services is based upon categorical funding streams, families may fall through the cracks or find that what they need to succeed is unavailable. Services that are provided may fail to help the family because other key needs are unmet. When this occurs, state resources are likely to be expended *ineffectively*.

State interest in collaboration as a means to address these difficult issues is currently high, and policymakers have adopted a variety of strategies to seek more effective service delivery among agencies. Much of the initial work to foster collaboration has been focused at the administrative, planning level of state organizations. Policymakers around the country have established task forces, coordinating councils, or other administrative structures to improve the level of interagency understanding, planning, and coordination in addressing cross-agency concerns on a variety of topics. Task forces and coordinating councils have been established on problems such as adolescent pregnancy, chemically exposed infants, youth gangs, and high school dropouts. They also have been developed on more general youth concerns, given that adolescent pregnancy, dropping out of school, drug use, and juvenile delinquency are interrelated.

Such statewide initiatives have helped identify the necessity for more coordinated approaches to address the needs of children and youth. Further, such initiatives have given a better understanding of the roles that various agencies have in the system that serves children and families. An appreciation of each other's work demands often leads to a greater willingness to go the extra step in one's own job and not to see other agencies as part of the problem.

In one such planning initiative, for instance, an agency director stated that what broke the ice was the recognition that all agencies shared the same goals: producing drug-free, nonabusive families who help their children develop and complete school without becoming pregnant or getting into trouble with the law. "It came as a revelation to many of us that juvenile justice, child welfare, education, and public health officials all shared this goal," he said.

Interagency planning initiatives at the state administrative level represent "first generation" approaches to collaboration. In addition to the state planning level, however, there are three other organizational levels where collaboration must occur to meet families' and communities' needs effectively and efficiently:

- Worker/family;
- Worker/intra-agency; and
- Worker/interagency.

Second generation initiatives such as those described in chapters three and four seek to foster collaboration at these three levels through guidance and support provided at the state administrative level.

At the most basic level, collaboration must exist between a direct service worker and the family that worker is serving. This is the caring adult who can connect with the family--the type of mentor who, by his or her presence and guidance at the right times, can help the family survive and succeed. The worker must proceed in partnership with the family to develop and achieve goals that lead toward self-sufficiency. To achieve this level of collaboration requires that workers be appropriately recruited, trained, and supported in providing such mentoring, advocacy, and support--whether they are part of the school, social welfare, juvenile justice, or community service systems. As the term *collaboration* implies, this is not a hierarchical relationship, with a desk separating client from worker and a set of rules and regulations dictating the worker's response to a family's call for assistance. Since the worker must negotiate with each family in setting mutually agreed-upon goals, he or she must exercise considerable discretion and exhibit substantial skill and flexibility in problem-solving.

Second, collaboration should exist between the direct service worker and other employees within an agency, particularly other direct service staff and the supervisor. If the service worker has greater discretion with families and no specific rules and procedures to follow, that person must be in a job setting that assists in the exercising of that discretion. A hierarchical setting, with the worker at the bottom, is inconsistent with the responsibility he or she has. A collegial setting, where line workers collaborate with supervisors, other workers, and staff, both in handling individual cases and in setting agency goals, is consistent with this level of responsibility. Collaboration within an organization can enhance a worker's capacity to collaborate with families.

Third, collaboration should exist among line workers in different agencies. Ideally, department of human services social worker Ginnie can get on the phone to school counselor Pat to compare notes and plan actions for Jenny and her family. "Collaboration ultimately is people working with people," states Toby Herr, project director of an employment program called Project Match in Chicago's Cabrini-Green housing project.

> A good worker gets to know which workers you send clients to in which agencies, and which types of follow-up you need when you do. You have to be able to assess the strengths of people in other organizations and use them accordingly. It's not necessarily the formal job responsibilities people have; it's what they actually do for clients that is important.

Developing this knowledge base of other human resources in a community is critical to cross-agency collaboration.

While these four levels of collaboration have been discussed independently, they are in fact interrelated.

From the bottom up, workers can collaborate effectively with their clients only if their own work setting is conducive to this new way of doing business. If that is the case, cross-agency collaboration among workers also is more likely to be accepted and rewarded by the agencies involved. Local agencies will likely provide this involvement only to the extent that state departments recognize the value of such interdepartmental collaboration.

From the top down, administrators should recognize that state interagency planning ultimately must be implemented at the local service delivery level and that incentives to local staff for such collaboration must exist. Local agencies will see interagency collaboration occurring only to the extent that it affects their own workers' discretion and effectiveness. Staff who are authorized to make decisions and who are provided support and feedback on their activities are more likely to work with clients in innovative, family-centered ways.

The next two chapters describe two initiatives in Iowa, conceived at the state level, that seek to foster collaboration at all four levels of organization. While both initiatives make use of state interagency coordinating councils, their primary focus is on results at the local service delivery level. The initiative described in chapter three, Iowa's decategorization project, focuses upon the child welfare system and families like Brandon's. The initiative described in chapter four, Iowa's family development grant program, is oriented more to families like Jenny's. These programs are truly second generation

collaboration initiatives. Chapter five argues, however, that such initiatives also suggest third generation approaches, those that can be extended beyond the demonstration phase to reform child-serving systems on a statewide, comprehensive basis.

Levels of Collaboration

Level 1.	Level 2.
Worker-Family Collaboration	**Intra-Agency Collaboration**
Joint development of family goals, with worker and family members determining needs, setting goals, and working toward greater family autonomy and functioning.	Workers at service delivery level given discretion in serving clients, provided support for decision making, and involved in agency planning.

Level 3.	Level 4.
Interagency Collaboration--Service	**Interagency Collaboration--Administration**
Workers at service delivery level in various agencies given incentives and support for joint efforts with staff in other agencies.	Administrators at state (local) level managing agencies to facilitate interagency and intra-agency collaboration through protocols, interagency agreements, staff organization, staff incentives, and job evaluation systems.

III

Decategorizing Child Welfare Services

Historical Context

Between 1982 and 1987, Iowa experienced a 40 percent increase in out-of-home foster care placements; at the same time, the number of children in Iowa declined by 8 percent and fewer families were willing to serve as foster parents. Because of the lack of available foster care within the state, many children were sent to out-of-state facilities. These placements were costly and, by 1987, assumed more than 15 percent of Iowa's $50 million child welfare budget. This was of particular concern to in-state providers of care, as well as to policymakers, who did not like to send public monies out of state.

Further, 90 percent of the child welfare budget was expended upon out-of-home placements, and only 10 percent on services that might be used to prevent placement. The state had created fully 30 different funding categories for child welfare services, each with its own rules and regulations. In addition, the funding mechanisms tended to encourage out-of-home placement since line items for foster care operated, for all practical purposes, as open-ended entitlements. Financing for other services was limited by fixed line-item budget categories. The result was a system many felt was driven by funding streams, as opposed to family needs.

Finally, several celebrated foster care cases, one becoming a feature on *60 Minutes*, placed increasing pressure on policymakers to reform the child welfare system. State legislators had explored the potential for financing intensive family preservation services as a means to reduce foster care placement costs and were impressed with the success of the mental health project in California's Ventura County to reduce costs through emphasis upon pre-placement services. They were interested in what additional actions could be taken to seek more cost-effective treatment alternatives for children and their families. They were frustrated, however, by the complexity of the existing array of services and accompanying regulations that they themselves had difficulty understanding and evaluating in determining program funding levels.

State-Level Initiation

After much deliberation within the Budget Subcommittee, which oversaw the state Department of Human Services, the Iowa General Assembly in 1987 directed the department to develop a "decategorized" child welfare financing system in two counties in the state. The purpose of this decategorized system was to consolidate the funding for child welfare services available through the 30 different funding streams into one child welfare fund, which would be administered locally and would cut across county and state human service agencies and the juvenile court.

> The department shall develop, for submission to the general assembly by January 15, 1988, for at least two counties within the state, a system for decategorizing the resources provided to those counties for child welfare and foster care services into a single child welfare budget and establishing procedures to allow for allocating resources on the basis of child welfare concerns as opposed to specific program categories. The department shall develop, for submission to the general assembly by January 15, 1988, to be used on at least a pilot basis, alternative reimbursement systems for providers that provide performance-based payment or payment that recognizes the need for transition support and counseling between out-of-home or institutional placement and home or community-based placement. The system shall be designed to enhance permanency planning goals, by increasing resource flexibility within current budgetary levels. It is the intent of the general assembly that the department develop this system in consultation with professionals in the child welfare field, using outside technical assistance from the National Conference of State Legislatures and the Center for the Study of Social Policy where possible.
>
> Source: House File 671, page 44, Section 203, subsection 9.

The legislative intent behind decategorization was to establish a system of serving children that was driven by the needs of children and families rather than funding streams and that could focus on preventive and home-based care rather than crisis and out-of-home services. The incentive to the participating counties was that they could use any savings they generated from more efficient service delivery to support other child welfare services. Alternatively, counties were expected to spend no more on child welfare services than they would have spent under the categorical funding system, so savings from more efficient service delivery had to be generated in order to fund new programs. The Department of Human Services was directed to waive regulations that would impede the counties' efforts to redesign their child welfare systems. Applications for the decategorization project had to be signed by the county board of supervisors, the juvenile district court, and the county Department of Human Services.

The Department of Human Services was given responsibility for further defining and overseeing the initiative and directed to work with an already established statewide committee made up of representatives from all sectors of the child welfare system.

Service-Level Implementation

After a year of state-level planning, Scott and Polk counties, representing 15 percent of the state's population and including the cities of Des Moines and Davenport, were selected for the project from four counties that applied. Their planning efforts began in September 1988 and they finalized their first-year implementation plans by April 1, 1989. These plans are now being put into operation.

Throughout this process, the state Department of Human Services provided support to and oversight of the projects and the Edna McConnell Clark Foundation provided substantial technical assistance, including funding for project coordinators selected by the counties. The National Conference of State Legislatures, with support from the Foundation for Child Development, also provided guidance and support. While this guidance encouraged the counties to explore alternatives to out-of-home placements and alternatives to high-cost institutional placements, all decisions on what to do were left to the counties, even that concerning the governance structure for the decategorized child welfare fund.

While the two counties went through different planning processes and emphasized different issues, there were a number of similarities in their first-year planning and in their initial implementation efforts. These are worth noting in some detail, as they represent issues that others contemplating collaborative initiatives are likely to experience.

First, the process itself was time-intensive. Planning committees in both counties met for literally hundreds of hours in developing the new decategorized service structure, the governing process by which child welfare funds would be administered, and the procedures to be employed in dealing with child welfare clients in a new way. This entailed meetings with representatives from the juvenile court, the county social services agencies, the county office of the state Department of Human Services, private child welfare service providers, and child welfare advocates and private funders of programs. Participants had to get to know each other better and understand the demands of different jobs in the child welfare system. It took several months of morning-long weekly meetings for participants to begin putting their individual agendas on the table for discussion and longer to discuss developing a common agenda. This time-consuming process continued in both counties because participants recognized that the planning would result in major program and system modifications.

In addition, both counties agreed on general goals for the development of a family-driven system and coordination to avoid multiple interventions into family life. Although these goals were consistent with statewide thinking about decategorization, they were the product of the planning committee and helped the counties establish ownership over the program. This work helped develop confidence and trust within the group and opened discussions to the more specific task of how to design services to achieve those ends. Even if the process had ended here, with no redirection of service funds, both planning committees indicated the effort would have been worthwhile, as lines of communication for coordination had been established.

Further, each county developed a governance structure for the decategorized child welfare fund that essentially required consensus among the county Department of Human Services, the county board of supervisors, and the county juvenile court. Officials from both counties believed that each of the three funders of the child welfare system must support all major decisions and that unilateral authority would undermine the process.

The two counties also agreed that more prevention and early intervention services in their child welfare system were necessary and then came up against the legislatively mandated constraint of budget neutrality in funding those prevention services. This forced both counties to look for ways to serve existing child welfare clients more efficiently (particularly high-cost families) in order to produce savings to fund desired prevention services.

Recognizing the necessity for a better client tracking system, each county developed one based upon the family unit, as opposed to the individual child. Under the categorical funding system in place in the state's other counties, services are reviewed and audited primarily in terms of the child's eligibility for them, their level of placement (to meet the state mandate of providing services in the "least restrictive" setting), and their availability. Beyond their particular responsibility in the agency, workers are not evaluated on overall services provided to the family, on service needs of other family members besides the child, or on the total costs expended for the child and family. In addition, employees usually do not have access to information collected about a child if it is collected by another service system.

By contrast, however, this information is central to decategorization. It is essential to know the range of services and their costs and to define a child's needs broadly to include those of his or her immediate family. In short, counties found that accountability under decategorization was much more outcome-driven, cost-conscious, and rigorous than that under the traditional, categorical system.

Another realization was the need to reevaluate and restructure the role of the line workers in the system, particularly to provide greater back-up and training support in light of their increased discretion. Each county developed special mechanisms for use with families that were multiple system users, ideally to reduce the number of staff involved with a family at any one time but minimally to assure that they coordinated case planning. In addition, each county established a flexible fund for workers to use to provide extraordinary services or support that could not be handled by the traditional categorical system. While this part of the decategorization process is just commencing, both counties recognize that it is at the heart of a truly family-driven system.

By identifying service gaps that produce more restrictive, costly placements for certain clients, each county estimated the number of clients so placed. It then developed services to fill these gaps, delineating specific client populations and expected outcomes. Most of these new services represented "more intensive" services at "less restrictive and disruptive" settings. Both counties concluded that the current categorical system tended to equate "less restrictive" with "less intensive and comprehensive"; consequently, more restrictive (and more costly) placements had been ordered than were necessary to deal with cases effectively.

Among the new services provided in one or both counties were intensive in-home family preservation services, needs-based and therapeutic foster care, day treatment, higher-level community-based (as opposed to out-of-state) residential treatment, aftercare, and five-day residential services. The county initiating the service had defined and identified the population for which each would be effective, from both treatment and cost perspectives.

Each county recognized that if services were to be delivered more effectively, direct service workers must be active participants in the decategorization planning process. Both counties are working to define expanded responsibilities for line workers and the back-up support they will need. While both use the term *case management*, they do not describe it simply as a "brokering of services" but rather as an engagement with the client in collaborative "problem-solving."

The planning process originally was thought to conclude with the development of a decategorization plan. Each county, however, now regards the decategorization project as continually evolving and requiring ongoing planning and problem-solving. Evaluation systems, particularly client tracking, provide feedback on the effectiveness of new services and identify additional families who might be served better through a different structure. Both counties have developed community outreach and education services and, in particular, are seeking to establish stronger links with their school systems.

Concrete Changes for Families

In terms of concrete actions, the decategorization projects have made targeted, yet significant, changes in funding their child welfare systems. They have expanded early intervention services and offered more intensive, comprehensive services that are less disruptive to the child and family. These changes are based upon the belief that such

services are more effective from a treatment perspective and less costly from a system perspective. Each county also has begun to allow line workers more responsibility in providing clients with services and is working toward a more individualized, client-driven service system.

In Scott County, for instance, a review of children in the child welfare system revealed a number of nine- to eleven-year-olds in residential placement who could be returned home with the development of a day treatment program and collaboration with the school system and special education funding. Through decategorization, Scott County has set and is meeting goals of dramatically reducing its placement rates at the state training school and the state juvenile home by establishing residential treatment programs within the community, thereby increasing the county's ability to work with the children's families for eventual reunification. The goals are realistic ones that will be met, Scott County officials contend, because everyone in the system--Department of Human Services workers, probation officers, and service providers--supports the goals of decategorization and sees the value of community-based solutions.

In Polk County, a case facilitation committee and a flexible fund have allowed special actions to be taken for individual families that would have been impossible under the categorical fund. For one family similar to that of Brandon's, where an out-of-state, $700-a-day placement was initially planned, a collaborative case plan was developed. Under this plan, a child psychiatric hospital, a residential treatment program, and the Department of Human Services agreed to share responsibility to provide the specialized, intensive services necessary for the child to remain in the community. Although expensive, the new service plan will cost $200 per day less than the alternative, out-of-state placement, and the plan includes parental involvement and counseling. A second family was reunited by using flexible funds and additional worker time in overcoming two barriers to reunification--the first month's rent for an apartment and the purchase of a new mattress for the child. Workers have been encouraged with the ability, in such selected cases, to meet *obvious* needs that the prior funding system did not cover.

Both Scott and Polk counties have designed a new type of foster family home that is better reimbursed, better trained, and has more back-up support than the existing foster family home. These "therapeutic" homes deal with youth who otherwise would be placed in residential treatment; in this setting, the foster parents serve as therapeutic agents under the guidance of professionals. These counties believe their programs can serve as models for the rest of Iowa and eventually can be included within the state's foster family funding system. "We have the flexibility to innovate," one official said. "On the one hand that's scary, but on the other it is an opportunity we can't ignore."

In a more abstract way, the decategorization projects have enabled child welfare workers from different systems to understand the overall system better and their part in it. In Scott County in particular, line workers from the courts, the Department of Human Services, and private agencies have gotten to know and trust one another. This understanding has enabled, on an informal level, more cross-system actions on specific child welfare cases. Scott County is now addressing the issue of *case management*, which it defines as a system where workers collaborate with families--building upon their strengths and guiding them toward self-sufficiency--and represent continuity in their lives. At the heart of this process is the involvement of existing line workers in the development of this new, family-centered case management system.

While the decategorization of funding is limited to foster care, juvenile justice, protective service, and child mental health, the planning process is only the first step toward better integration of the child welfare system with the larger family and community

service systems. In fact, while not originally a part of the initiative, in both counties the school system has been brought into decategorization planning and in Polk County the school superintendent has been added as a member of the project's governing board.

Levels of Collaboration

Although the state legislature initiated Iowa's decategorization project, the impetus behind it was to develop greater collaboration at the local administrative and service levels. In both Scott and Polk counties, administrative planning has raised the need for collaboration at the interagency, the intra-agency, and the worker-family levels. "Most of us didn't envision it this way," one administrator in Scott County indicated, "but if decategorization was going to work, the need for collaboration on down the line became apparent. Further, we couldn't leave anybody out of the process; we always had to strive to be inclusive. The thing is we're all proud of what we're doing."

It is still too early in the implementation process to measure long-term cost-effectiveness. The success of such an initiative, which is time-consuming and can be energy-draining, initially may be gauged less by what has happened to families in concrete terms than by how participants in the system feel invested in the initiative. This investment has produced long-range planning and consensus building on decategorization's goal to reduce out-of-home placements and to serve youth within rather than outside the community. With respect to the decategorization projects, this involvement has occurred on the state legislative and state Department of Human Services levels through local administrative levels down to that of the staff themselves.

IV

Family Development

Historical Context

In 1987, in keeping with trends from other states, both the Iowa General Assembly and the governor made welfare reform a priority item for the 1988 legislative session and established separate committees to address the issue. While welfare reform was rated as a priority, however, neither the executive nor legislative branches of government, controlled by different political parties, prescribed any specific approach to the issue other than that the state's welfare system should focus on leading families to economic self-sufficiency.

From the legislative branch of government, however, came the belief that Iowa could develop a truly innovative approach to the issue and that it did not have to take a back seat to Massachusetts' Employment and Training (ET) program, Washington's Family Independence Program (FIP), or California's Greater Avenues for Independence (GAIN). In addition, legislative leaders succeeded in getting the state's major employers, through the Iowa Business Council, to sponsor a study of Iowa's welfare system and the changes that should be made to develop stronger workforce skills among welfare recipients. This interest from the business community raised both the visibility and the legitimacy of state efforts to improve Iowa's welfare system.

State-Level Initiation

The family development grant program emerged from the General Assembly's interim committee as one element of the state's welfare reform initiatives. Essentially, it came from the same group of legislators who authorized decategorization and shares many of the same orientations toward community-based program development.

The family development grant program attempts to integrate family support and education principles into a welfare-to-work system. The enabling legislation established the multi-agency Family Development and Self-Sufficiency Council comprised of child development, child welfare, and employment specialists. It also included "users" of the Aid to Families with Dependent Children (AFDC) program. The council is responsible for awarding grants to agencies providing family development services to AFDC families at risk of long-term welfare dependency. While applying agencies are not required to provide full services for the families they intend to serve, they must identify the manner in which they will access needed services and demonstrate good working relationships with agencies providing those services.

As structured, the family development grant program was based upon several key expectations:

- Families on AFDC share with the state the overall goals that they become economically self-sufficient and that their children grow up in a nurturing environment, stay healthy, and develop according to their potential.

- The state can identify certain families on AFDC who are at high risk of long-term welfare dependency. The family development program can be structured

to work with these families, where the needs are greatest and the impact of the program is most likely to be cost-effective.

- These families (which are fewer than one-half of all families on AFDC at any given time and fewer than one-quarter of those applying for assistance in any month), in addition to being at risk of long-term welfare dependency, also have children with a variety of problems (abuse and neglect, developmental delays, delinquency, and dropping out of school).

- Skilled family development workers, who form long-term trusting relationships with such families, can help them in a number of measurable ways that relate to the economic viability of the family, its functioning, and its children's health and development.

- Local grantees, if given flexibility in designing programs, can structure them to use existing community resources efficiently and meet their clients' needs effectively. To do so, however, grantees must have sufficient resources to maintain intensive contact over an adequate period of time to help families develop and meet their goals.

- Evaluation strongly influences what programs actually do. Therefore, the family development grant program must include the means to measure outcomes relating to a broad range of improvements to the family situation such as finding work, bettering family functioning and parent-child interaction, and promoting child health and development. In the long term, the cumulative effect of program gains in these areas will justify the economic investment.

Rather than requiring a traditional request for proposal whereby grant applicants enumerate the means by which they would deliver an array of services (with points allocated for each service), the state provided applicants with a strategic planning guide discussing the overall philosophy of their program. Applicants then wrote a single narrative describing the vision they had of their program and discussing how they intended to work with families from the recruitment stage through graduation from the program. Also as part of the process, applicants were encouraged to include letters of support from other community agencies and organizations, particularly those to whom they might refer families for direct services.

Initially, seven grants were awarded in July 1988 from $690,000 in state appropriations for the program. In 1989, the number of grantees increased to 10 and the level of funding to $890,000. Additional appropriations of $25,000 in 1990 allowed for modest increases in the grants.

Oversight of the funded programs at the state level is divided. The Family Development and Self-Sufficiency Council ultimately is responsible for awarding grants and approving rules. The Department of Human Services, which also promulgates program rules, negotiates with the federal government for matching funds. Project staffing and technical assistance and support to the grant sites are taken care of through the Department of Human Rights. The legislature established this division of responsibility to broaden program ownership, avoid single-agency dominance, and reduce hierarchical control by the state over local programs.

Service-Level Implementation

All 10 grant programs employ family development specialists to work in partnership with families, and all have used a training program developed by the National Resource Center on Family-Based Services at the University of Iowa. Caseloads generally range from 10 to 15 families per worker. Families are allowed in a program up to three years, although many are expected to graduate from the program earlier.

Except for these similarities, programs differ substantially. Some work primarily with teenage parents on AFDC, others with families who have been on AFDC for several years, others with families whose heads-of-household were school dropouts and have had virtually no work experience. Five of the programs are administered by community action agencies; two by multi-service, nonprofit child welfare agencies that also have residential programs for youth; one by a local YWCA; and two by county governments. Several are center-based programs, and some are primarily home-visiting programs, although all have both home-visiting components and group activities. Programs are responsible for recruiting families from lists supplied by the Department of Human Services, although family participation is voluntary. Many programs have been successful in securing participation from more than 70 percent of the potential families.

Mid-Iowa Community Action's (MICA) family development program, one of the largest, serves approximately 100 families with single female heads-of-household who are from several nonmetropolitan counties and who have been on AFDC for at least two years. MICA's program involves a process that includes invitation, assessment, placement, support, joining, and separation, with regular home visits and structured group activities. According to Gary Stokes, MICA executive director,

> MICA had been a "service provider" for a number of years, distributing home heating assistance, weatherization, WIC [Women, Infants, and Children] coupons, and other services to clients. What we found was that our "clients" weren't necessarily improving their position in society and that we weren't oriented to actually helping them. We worked to change the way we did business to focus upon the client rather than the service, and the family development grant program offered us an opportunity to further this process.

The MICA program now focuses upon family needs and strengths and seeks to use services only if they help families meet self-sufficiency goals.

Concrete Changes for Families

Since programs were not funded until July 1988 and recruitment of families took considerable time, most programs have been operating for less than two years. Therefore, assessment of program impact has been largely qualitative and related to specific cases.

After this first year of operation, the enthusiasm of both workers and families for the program is extremely high. Program managers indicate, however, they did not anticipate the level of need evident in the families they are serving. In fact, MICA identified the following characteristics among its caseload of 91 single-parent families:

- 34 percent known and an additional 26 percent suspected adult survivors of child sexual abuse/incest;

- 46 percent past victims of domestic violence;
- 31 percent past and 11 percent current substance abusers;
- 25 percent past and 13 percent current child abusers or neglecters;
- 35 percent currently cohabiting with a significant other;
- 53 percent adult children of alcoholics; and
- 34 percent with no prior work history (not even a summer job).

Such figures, similar to those reported for other programs, indicate that needs for these AFDC families extend into a number of areas besides employment training and welfare-to-work.

Three cases are described briefly from among those served by family development programs. In addition to illustrating the program's impact upon specific families, these cases show the diversity of those served by the program, the different types of problems development workers are faced with, and the need for collaboration in helping such families.

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Sandy, age 22, pregnant by her boyfriend when she came into the program, also had two preschool daughters. She was a recovering alcoholic, as was her boyfriend. She felt extremely guilty about having a child out-of-wedlock and wanted to marry her boyfriend, who was currently employed but had an erratic work history. The family development specialist helped find an attorney so Sandy could get a divorce from her husband and make plans to marry her boyfriend. The worker also helped the boyfriend set goals for continued employment and plan financially for marriage. Since then, he has been a steady worker and has received a raise. Although Sandy originally believed she had no marketable skills, she has enrolled in a program to receive an AA degree in child development.

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Diane, age 21, was originally reluctant to join the program, and the family development specialist had to reassure her constantly that she could quit whenever she wanted. Diane has three children and has been pregnant eleven times, the first three by her father. At the time of entering the program, she lived in a trailer court where there were a number of known pedophiles. The family development specialist met Diane's own statement of her first need by getting her and her children into subsidized housing. She has received guidance to protect her children from sexual abuse, to learn to practice birth control, and to deal with her own abuse, which the family development specialist believes is a big step. Diane is now doing volunteer work for the community action agency and is developing more women friends.

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Heidi came into the family development program as a divorced mother of one four-year-old son with a behavior problem. She has had a number of abusive male relationships and is frequently victimized by her friends. She was particularly depressed about being on welfare and admitted she sets herself up for failure. Heidi has been counseled by a staff

therapist as part of the family development program and is working on saying no to her friends. Her son, a frequent visitor with her to the center, has shown fewer signs of aggressive behavior and, at the family development worker's urging, is now enrolled in a preschool program. While Heidi wants to pursue a college education soon and is quite bright, she is being counseled to choose a more realistic first step.

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These three cases suggest the potential for truly family-centered program initiatives to work collaboratively with families (and other service systems) in meeting both the family's and society's needs. While state welfare-to-work (Job Opportunities and Basic Skills [JOBS]) programs under the Family Support Act might provide employment services for the female heads-of-household in each of these cases, these services don't address the families' most pressing needs and, taken alone, are unlikely to be effective. Even if employment and welfare independence were achieved, these families would likely experience other significant problems that public policy eventually must address. Clearly, for certain families on AFDC, the family development program in Iowa has the capacity to be much more effective in developing long-term self-sufficiency skills than a solely short-term, employment-oriented case management service could under the JOBS program.

Levels of Collaboration

The key feature of the family development grant program is the family development specialist and his or her work with the family. The program's structure at the state level is designed to provide sufficient resources at the local level so that the specialist's work can be effective. The structure of the grant also encourages collaboration on the local service delivery level through its requirement that grantees identify sources of support for meeting a wide variety of family needs.

As the programs have been implemented at the local level, the critical role of the family development specialist has become increasingly clear. As a problem solver, the specialist may have to assume the role of advocate, service broker, and counselor, depending upon family needs. At MICA, Stokes indicates that developing a nurturing environment for the specialist is critical to the program's success. "When we recruit and train a worker who has good skills at problem-solving with the family," Stokes indicates, "we've got to make sure that worker stays with us. The only way to retain quality workers is to give them salary and status within the organization, to trust and respect their judgments, and to offer them a collegial atmosphere where they can share views and learn from each other. As an agency," Stokes maintains, "MICA has come a long way over the last five years in putting into practice what it preaches." As the next logical extension, Stokes is now looking outward from his organization to greater involvement of the business and education communities and sees this as essential to legitimizing the approach MICA has taken.

In essence, the structure of the family development program, while focusing upon the worker-family level, also gives administering groups the flexibility and encouragement to pursue collaboration at other organizational levels.

V

Conclusion

No one is opposed to collaboration as a concept. Therefore, politicians and other policymakers can call for greater collaboration without political risk. By making such calls, they also may imply that the current system of delivering services itself is the problem, and, if only more collaboration occurred, problems would be solved without the need for additional resources.

This report has argued that collaboration is a process by which our child-serving systems can address the very real problems affecting our children in a better manner. It has not argued, however, that it is a simple, or a cost-free, process to initiate. As policymakers look at fostering greater collaboration to address these problems, they must understand the complexity of this process and the need to nurture such activity. Collaboration does hold promise for addressing vexing social problems, but it also is easy for such solutions to be largely rhetorical exercises that mask the fact that little is being done to improve children's lives.

On the other hand, a variety of options for fostering real collaboration are available to state lawmakers. While both the decategorization and the family development programs were established by state legislation to be locally governed and designed, decategorization started more as an administration-directed initiative and family development as a worker-family program. In implementation, however, both have their long-term success tied to incorporating collaboration at all levels of organization.

While a number of issues have been raised here regarding collaboration, five points are worth special emphasis:

(1) *Collaboration is a means to an end, not an end in itself.* Policymakers must ask what problem collaboration is designed to solve, prior to proposing it as the means to solve that problem.

(2) *Developing interagency collaboration is time-consuming and process-intensive.* Policymakers must recognize that substantial resources have to be allocated for collaborative ventures, and that they should be expended only when clients would receive improved services or those services would be provided more efficiently. Some services can be provided effectively and efficiently without collaboration.

(3) *Interagency coordination does not guarantee the development of a family-centered support system nor the establishment of a trusting relationship between an at-risk child or family and a helping adult.* If that is the goal of policymakers, they must make collaboration at the worker-client level a central part of their initiatives and not trust it to occur because agencies are *required* to coordinate with one another.

(4) *Collaboration occurs among people, not among institutions. It must be nurtured and rewarded at each level of organization at which it is expected to take place.* Therefore, the time it takes to collaborate must be built into the work day, and the worker must be favorably evaluated after taking the time to collaborate. While interagency agreements may be important institutional mechanisms to

clarify, formalize, and spell out relationships--and, in particular, to avoid misunderstandings between agencies--they must be structured to support workers' interactions with colleagues within the agency, with those in other agencies, and with the families being served.

(5) *Creative problem-solving skills must be developed and nurtured in those expected to collaborate.* Among these skills are the ability to deal with ambiguity and the stress that more personalized decision making can bring. Policymakers must recognize that, if workers are expected to share responsibility and make decisions outside of a set of rules and regulations, they must be provided the back-up support and guidance necessary to assure that this autonomy is effectively employed. Ownership of errors of judgment must be shared, as human errors inevitably will occur. On the other hand, oversight is necessary to assure that workers do not abuse the significant powers given to them in a truly collaborative system.

Many, but far from all, of the first generation approaches to collaboration--the creation of interagency commissions or task forces--have begun to address these points and to fashion solutions. This report has looked in more detail at two second generation approaches in Iowa--those that have sought to foster collaboration in local system design and implementation. As these two second generation approaches develop and mature, more insights will be available from them.

At their best, however, these second generation approaches will spawn more comprehensive, third generation initiatives. Potentially, Iowa's demonstration programs can serve as models for other communities. A better understanding of the elements and conditions critical to successful programs also can be obtained by contrasting more and less successful programs. Some specific components of programs may be usefully incorporated into the existing statewide categorical service system.

In the long run, however, the goal is to have comprehensive, effective programs statewide. They should allow for local diversity and support local program ownership. They should also, however, assure the availability of effective, consistent family-centered support for all who need it.

Second generation competitive grant programs, by definition, are awarded to those grantees who demonstrate the greatest opportunity for success. Programs dependent upon local ownership and support cannot be transferred easily from one project site where they are successful to another where many of the elements and conditions critical to making them successful do not exist.

In third generation approaches, state policymakers will have to transfer successful program models *and* the attributes critical to their success into communities without strong histories of program success. While second generation approaches generally identify community leaders who have considerable skills in making programs work, that community leadership itself may have to be nurtured and developed in third generation programs. If the state role in fostering such collaboration is to be less one of providing service mandates to local programs and more one of providing guidance, the state will have to develop skills in offering that guidance and developing that leadership. The desire among state policymakers for prescriptions must be tempered with the recognition that the overall policy goal is to improve outcomes, not simply to streamline processes--that holistic approaches require flexibility in program design and administration. Creating collaborative models on a statewide basis will indeed be a formidable challenge, but one

made easier as more second generation initiatives broaden understanding of how local systems can become more outcome-based and collaborative with each other and with the children and families they are meant to serve.

State Approaches To Foster Collaboration

First Generation Approaches

Through the establishment of interagency task forces, councils, work groups, or commissions, state policymakers direct agencies to plan together to address youth needs and concerns.

Second Generation Approaches

Through multi-site demonstration projects, state policymakers finance and provide guidance and technical assistance to local programs taking innovative collaborative approaches to meeting children's needs, with sites selected for their ability to develop models that could apply to other parts of the state.

Third Generation Approaches

Building upon the lessons from multi-site demonstration projects, state policymakers design comprehensive, statewide collaborative approaches to meet children's needs, incorporating strategies to develop the leadership base needed to support successful programs.

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The Child and Family Policy Center is administered by Tanager Place. Located in Des Moines, Iowa, the center was established in 1989.

Children, Youth, and Families Program

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Child Care Quality Project. Funded by the Carnegie Corporation of New York, the project assists state legislators in improving the quality of state child care services. Issue areas include: licensing and regulation; affordable credentialing and ongoing training programs for providers; support systems for family day care providers; administrative structures for state child care services; and affordable quality early childhood programs for low-income families.

Child Welfare. Funded by the Edna McConnell Clark Foundation and the Foundation for Child Development, this project assists state legislators in improving state child welfare systems serving children and families in crisis. Out-of-home placement is the most expensive form of service and contributes to trauma for the child and instability for the family. With increasing placements and costs states are exploring service alternatives. Information is available on family preservation services, adoption, other placement alternatives, interagency coordination, financing child welfare services, and child abuse and neglect.

Community Development. Funded by the Ford and Charles Stewart Mott foundations and the Foundation for State Legislatures, the project assists state legislatures in exploring methods to integrate the human services and economic development programs developed for distressed urban communities. The project focuses on the role of Community Development Corporations in tailoring housing, economic development, and social services programs to specific community needs.

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